

REGISTRATION

MMR 2004 REGISTRATION FORM

June 21-25, 2004
Santa Fe, New Mexico

Name: _____
First MI Last

Affiliation: _____

Address: _____ Zip Code _____

Country: _____ Telephone (with Area or Country Code): _____

FAX (with Area or Country Code): _____ Email: _____

CONFERENCE FEES

(Fee includes Lunches, Reception, Conference Dinner, and Communications)

Registration before April 30, 2004	\$290.00	\$_____
Registration after April 30, 2004	\$350.00	_____
Registration for students before April 30, 2004	\$150.00	_____
Registration for students after April 30, 2004	\$200.00	_____
Conference dinner for guest(s)	\$ 50.00 (ea)	_____
	TOTAL	\$_____

Full-time students please attach proof of your full-time student status by enclosing a letter from your Department Chair.

METHOD OF PAYMENT

____ MasterCard ____ Visa ____ Check Enclosed

Total Amount authorized to charge to credit card: \$_____

Credit Card #: _____ Expires: _____

Name as it appears on Credit Card: _____

Checks must be in U.S. funds and drawn on U.S. banks. Please make checks out to NISS/MMR04 and mail with registration form to the address below:

MMR 2004
c/o NISS
P. O. Box 14006
Research Triangle Park, NC 27709-4006

If paying by credit card, mail registration form to the address above or Fax to

(919) 685-9310

For confirmation of receipt, please email mmr2004@niss.org or call

(919) 685-9300.